_											
PATENT APPLICATION FEE DETERMINATION RECOR							Application or Docket Number				
	PATENT		In FEE DI			ON RECOF	RD	09	81	4641	10
		CLAIMS A		71		0		LENTITY	,	OTHER	THAN
TOTAL CLAIMS			(Column 1) (Col		(Colu	mn 2)	TYPE	E FEE	OR 1	SMALL RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC			BASIC FEE	
TOTAL CHARGEABLE CLAIMS			써 minus 20=				X\$ 9		1	X\$18=	
INDEPENDENT CLAIMS			minus 3 = *						OR		
MULTIPLE DEPENDENT CLAIM P							X40	= 40	OR	X80=	•
						+135	5=	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	AL 395	OR	TOTAL	
	С	(Column 1)	MENDED	(Colu	mn 2)	(Column 3)	SMA	LL ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IBER	PRESENT EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=	OR	X\$18=	
	Independent	*	Minus	***		=	X40	= 1	OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		+135	<u>. </u>	OR	+270=	
							TO	TAL		TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. F	EE L	10	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9		OR	X\$18=	
	Independent	*	Minus	***		=	X40:	=	OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		105			070	
							+135		OR	+270= TOTAL	
		(O-1,		(0.1	21	10 1 01	ADDIT. F		OR	ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS			mn 2) HEST	(Column 3)			,		
		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RATI	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE
ON.	Total	*	Minus	**		=	X\$ 9	=	OR	X\$18=	
AME	Independent	NTATION OF M	Minus	***	T CLAIR	-	X40:	=	OR	X80=	
	LINOT PRESE	ATATION OF M	OLITE DEI	- CINDEIN	I CLAIM		+135	_	OR	+270=	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

OR

TOTAL

ADDIT. FEE

TOTAL

ADDIT. FEE

PATENT APPLICATION FEE DETERMINATION RECORD												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY			OR	OTHER THAN SMALL ENTITY	
FOR	·	NUMBI	ER FILED		NUMBER EXTRA		RAT	Έ	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))						1		\$ 160	OR		\$	
	AL CLAIMS FR 1.16(c))		4 minus 20 =			* 0		· =		OR	x \$ =	,
	EPENDENT CLA	AIMS	4 minus 3 =		*		x 40		40	OR	x=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								_=		OR	+=	
* If the difference in column 1 is less then zero, enter "0" in column 2								A L	200	OR	TOTAL	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMAI	L E	INTITY	OR	OTHER T	3.0
AMENDMENT A	*	CLAIMS REMAINING AFTER AMENDMENT		NU PREV	GHEST JMBER JOUSLY ID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total (37 CFR 1.16(c))	*	Minus	**		=	x \$			OR	x \$=	
ME	Independent (37 CFR 1.16(b))	*	Minus	***		=	х	_=		OR OR	x=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						 +	_=		OR	+=	
(Column 1) (Column 2) (Column 3)							TOTA ADDIT. FI			OR A	TOTAL DDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	GHEST JMBER JOUSLY ID FOR	PRESENT EXTRA	RAT	Е	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total (37 CFR 1.16(c))	*	Minus	**		=	x \$. =	= OI	OR	x \$=	
ME	Independent (37 CFR 1.16(b))	*	Minus	***		=	x	_=		OR	x=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT C			IT CLAIM	(37 CFR 1.16(d))	+	-=		OR	+=		
(Column 1) (Column 2) (Column 3)								AL EE		OR _A	TOTAL DDIT. FEE	V
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	GHEST JMBER JOUSLY ID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total (37 CPR 1.16(c))	*	Minus	**		=	x \$	_=		OR	x \$=	
ME	Independent (37 CFR 1.16(b))	*	Minus	***		=	x	_=		OR OR	x=	
Æ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))							_=		OR	+=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.